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′ 001444 7:	•	C. OFF	5 700 5 78 TRACEN	Fee(s) Transmittal. I papers. Each addition have its own certification.  I hereby certify that States Postal Service addressed to the Missing and the states addressed to the Missing addressed to t	of mailing can only be used for his certificate cannot be used for his certificate cannot be used for all paper, such as an assignmente of mailing or transmission.  The ertificate of Mailing or Transmits Fee(s) Transmittal is being this Fee(s) Transmittal is being with sufficient postage for firm all Stop ISSUE FEE address (PTO (703) 746-4000, on the contraction of the sufficient postage for firm all Stop ISSUE FEE address (PTO (703) 746-4000, on the contraction of the sufficient postage for firm all Stop ISSUE FEE address (PTO (703) 746-4000, on the contraction of the sufficient page 1.5 for firm all sufficient page 1.	for any other accompanying ent or formal drawing, must smission g deposited with the United st class mail in an envelope above, or being facsimile
						(Date)
APPLICATION NO.	FILING DATE	F	FIRST NAME	D INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/673,785	09/30/2003		· Tsai-Y	'un Yu	YU45	3006
TITLE OF INVENTION: B	ICYCLE SADDLE					
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$685 #JOO		\$300	\$985 \$1000	03/07/2005
EXAMINER		ART UNIT		CLASS-SUBCLASS	_]	
CRANMER, LAURIE K		3636		297-214000		
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. UZ/17/2005 AWONDAF2 00000203 10673785  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  700.00 OP  01 FC:2501  02 FC:1504  300.00 OP  03 FC:8001  30.00 OP						
Please check the appropriate assignee category or categories (will not be printed on the patent):						
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